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REPORT OF RECEIPTS ECRETARY OF THE SENATE RECEIVED AND DISBURSEMENTS For An Authorized Committee PAGE 1/5 RECEIVED RE

NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If tylover the lines.		2FE4M5	
Annette Bosworth MD ADDRESS (number and street) Check if different than previously reported. (ACC) 2. FEC IDENTIFICATION NI C C00547539	610 S. Boulevard Tampa UMBER 3.	CITY CITY NIS THIS REPORT (N	ST.	SD 33606 ATE AMENDED (A)	ZIP CODE STATE V DISTRICT
4. TYPE OF REPORT (Ch. (a) Quarterly Reports: April 15 Quarterly F July 15 Quarterly F October 15 Quarter January 31 Year-En	Report (Q1) Report (Q2) erly Report (Q3) and Report (YE) t (TER)	Primary (1 Convention Election on General (3	2P) n (12C) Report for the:	General (12G) Special (12S) Runoff (30R)	in the State of Special (30S) in the State of St
5. Covering Period MMM Od Od Od Od Od Od Od Od					
NOTE: Submission of false, error Office Use	neous, or incomplete info	rmation may subject the	person signing this	FEG	ties of 2 U.S.C. §437g. C FORM 3 vised 02/2003)